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minital obis,	MIN 33403-2420		<u>L</u>	Rachel Gagliardi	$\sim$	(Depositor's name
			_	K Ongle	سلان	(Signature
			ŀ	March 25, 2010		(Date
APPLICATION NO	FILING DATE		FIRST NAMED INVENTO	OR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/686,154 TITLE OF INVENTION:	10/15/2003 METHOD OF SECURI	NG VERTEBRAE .	Thomas W. Davison		1291.1134102	6193
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/05/2010
EXAMIN	NER	ART UNIT	CLASS-SUBCLASS	7		
BUI, VY Q		3773	600-102000			
"Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AN	ndence address (or Chan 122) attached. atton (or "Fee Address" or more recent) attached D RESIDENCE DATA: is an assignee is Identifi in 37 CFR 3.11. Comple	ge of Correspondence Indication form d. Use of a Customer TO BE PRINTED ON 1	(2) the name of a sin- registered attorney of 2 registered patent at listed, no name will b THE PATENT (print or t	ype) patent. If an assigner n assignment.	member a 2 sof up to o name is 3	ON, SEAGER & TUFTE.
Please check the appropriat	e assignee category or c	ategories (will not be pr	inted on the patent) : [	Individual 🗹 Cor	poration or other private gra	oup entity Governmen
4a. The following fee(s) are submitted:  4 Issue Fee  4 Publication Fee (No small entity discount permitted)  4 Advance Order - # of Copies  4			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  \[ \begin{align*} \text{A bock is enclosed.} \\ \end{align*} \]  \[ \text{Payment by redis card. Form PTO-2038 is attached.} \]  \[ \text{The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment. On Deposit Account Number 2004.1 \]  \[ \text{(enclose an extra copy of this form)} \]			
Change in Entity Status  a. Applicant claims S	MALL ENTITY status.	See 37 CFR 1.27.	☐ b. Applicant is no lo	nger claiming SMALI	L ENTITY status. See 37 C	FR 1.27(g)(2).
nterest as shown by the rec	ords of the United State	s Patent and Trademark	Office Chier than	the applicant; a regist	ered attorney or agent; or th	ne assignee or other party in
Authorized Signature /n		lilles	y M	Date March 2	5, 2010	
Typed or printed name	NANCY J. PARSONS	· · · · · · · · · · · · · · · · · · ·	. /1	Registration No.		
This collection of informati in application. Confidential ubmitting the completed a his form and/or suggestion lox 1450, Alexandria, Virg lickandria, Virginia 22313 Under the Paperwork Redui	on is required by 37 CFI lity is governed by 35 U pplication form to the U s for reducing this burde linia 22313-1450. DO N 1450.	R 1.311. The information S.C. 122 and 37 CFR   SPTO. Time will vary on, should be sent to the KOT SEND FEES OR C	n is required to obtain or 1.14. This collection is edepending upon the indi chief Information Offic COMPLETED FORMS I	retain a benefit by the stimated to take 12 mi vidual case. Any com er, U.S. Patent and To O THIS ADDRESS.	e public which is to file (and inutes to complete, includin ments on the amount of fir rademark Office, U.S. Dept SEND TO: Commissioner	t by the USPTO to process ag gathering, preparing, and the you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450